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. (Re	equestor's Name)	
(Ac	idress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
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COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: NAVARRO'S INVESTM	ENT SERVICES, LLC of Limited Liability Company)	
Dear Sir or Madam:	•	
The enclosed Registered Agent/Registered C	Office Change and fee(s) are submitted for filing.	
Please return all correspondence concerning	this matter to the following:	
GILBERTO NAVARRO		
(Name of Person)		
NAVARRO'S INVESTMENT SERVICES, LLC		
(Firm/Company)		
300 SEVILLA AVENUE, SUITE 202		
(Address)		
CORAL GABLES, FL 33134		
(City/State and Zip Code)		
F. C. d		
For further information concerning this matter	er, please call:	
GILBERTO NAVARRO	at (305) 445-5223	
(Name of Person)	(Area Code & Daytime Telephone Number)	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations	Division of Corporations	
Clifton Building	P.O. Box 6327	
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314	
Enclosed is a check for the followin	ng amount:	
☑ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy	

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

S INVESTMENT SERVICES, LLC
y: 300 SEVILLA AVENUE, SUITE 202 CORAL GABLES, FL 33134
300 SEVILLA AVENUE, SUITE 202 CORAL GABLES, FL 33134
L07000057525 4. Document number
the records of the Florida Dept. of State; NAVARRO, GILBERTO
7003 N. WATERWAY DRIVE
W Registered Office address:
300 SEVILLA AVENUE SUITE 202 CORAL GABLES ,FL 33134
laws of the State of Florida, it is hereby confirmed et address of the registered office and the business ase of a Florida limited liability company, it is by an affirmative vote of the members of the limited of organization or the operating agreement of the
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Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00

(Signature of Registered Agent)